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WARRINGTON RURAL DISTRICT COUNCIL



ANNUAL REPORT

ON THE WORK OF THE
PUBLIC HEALTH
DEPARTMENT

FOR THE YEAR 1957



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Chief Public Health Inspector	*W. A. MORRISON, M.R.S.I. M.Inst.P.C., BARRISTER AT LAW.
Additional Public Health Inspectors	*S. REEVES, B.A., Cert. S.I.B. *W. T. DITCHFIELD Cert.S.I.B. *N. G. MAYNE, Cert.S.I.B. San Science
Clerical and General Staff	Mr. J. BARLOW. Mr. F. A. SMITH.
Pupil Inspector	Mr. B. L. FOX. <i>resigned Dec. 1957</i>

*—Qualified Inspectors of Meat and Other Foods (R.S.I.).

WARRINGTON RURAL DISTRICT COUNCIL

ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1957

TO THE CHAIRMAN AND MEMBERS,
WARRINGTON RURAL DISTRICT COUNCIL.

MR. CHAIRMAN, MADAM AND GENTLEMEN,

I have pleasure in presenting for your consideration and approval my Annual Report as your Medical Officer of Health for the year 1957, which, as in previous years, includes also information which bears very closely on the general health of the population through the more personal and individual health and welfare services provided by the County Council, as the Local Health Authority, under the provisions of the National Health Service Act, 1946, and other enactments, particularly the National Assistance Acts and the various statutes dealing with the care of children and young persons.

A study of the comparative table of vital statistics at once reveals the very welcome fact of substantial increases in the live-birth rates for the year: both the "crude" rate and the "adjusted" rate, at 15·6 and 17·0 per 1,000 population, are significantly higher than the corresponding rates for 1956, which were 12·5 and 15·6 per 1,000 respectively; also the crude rate is some 25% higher than the quinquennial mean rate for the years 1952-56 inclusive. In keeping with this is a larger "natural increase" (the excess of live births over deaths) of 162, as compared with 112 last year. Moreover, the number of still-births registered (7), although identical with the 1956 figure yet means a lower still-birth rate of 13 per 1,000 total births as against 15 per 1,000 last year. This still birth rate is as low as any previously recorded and is approximately only two-thirds of the mean rate for the previous five years. Again, no "maternal deaths" occurred during the year and the infant and neo-natal mortality rates at 27 per 1,000 and 19 per 1,000 respectively, shew some improvement on those for 1956, and on the quinquennial mean figures.

On the debit side of the account one must admit an increase both in the total number of deaths registered (366), and in the crude death rate 10·8 per 1,000, as compared with the corresponding figure of 338 and 9·4 per 1,000 for 1956, and quinquennial means of 311 and 8·5 per 1,000. Comparing the adjusted death rate, however, a true comparison with other districts of both England and Wales as a whole, we find a figure of 11·4 per 1,000, which compares closely with the rate of 11·5 per 1,000 for the country generally.

Enquiry into the causes of deaths during the year again reveals the part played by heart disease, and the increasing proportion of the total deaths which are ascribed to “cancer”. Of the 366 deaths registered, no fewer than 205, or 56% were due to diseases of the heart and circulation, in particular to coronary disease (71), to diseases of the blood vessels to the brain and spinal cord (the so-called strokes) (32), and to other types of heart disease, mainly of rheumatic and degenerative origin, which resulted in no fewer than 87 deaths. Next in order of magnitude comes the cancer group, with a total death-roll of 69, equally distributed as to sex, comprising 10 cases of cancer of the lung or bronchus (8 in males), 10 of cancer of the breast or reproductive organs in females, 6 of cancer of the stomach, again equally divided as to sex, and 41 cases, 23 males and 18 females with “cancers” in parts of the body other than those enumerated above. The cancer death-rate for the year of 2·0 per 1,000 population, and the proportion of cancer deaths to total deaths of nearly 19%, or one in five, is unfortunately a new high record in every way: the total cancer deaths are 17 higher than in 1956, and 21 more than the quinquennial mean of 48, while the proportion has increased by 20% since last year, and shews the same rate of increase on the mean figure for the years 1952—1956.

Diseases of the respiratory system (if we include influenza and pneumonia in this group), contributed to some 40 deaths, or 11% of the total: other “defined and ill-defined” diseases to 27 deaths, or some 7% of the total; and deaths due to violence, 9 in number, comprised 8 accidents; 5 associated with motor-vehicles, 3 other accidents and 1 suicide. Included in this total of 40 deaths due to respiratory disease are 4 fatal cases of respiratory tuberculosis, which figures compares favourably with the 7 fatalities in 1956, and a mean quinquennial number of 9. The total accidental deaths, also, are less than one-half of those in the previous year.

There has been a very heavy incidence indeed of notifiable disease during the period, a grand total of 721 notifications being received; of these, however, 601 related to measles, only 23 to scarlet fever and 18 to whooping cough. 17 cases of dysentery were notified (of which 12 were from Winwick hospital), 5 cases of enteric group fevers (all from Winwick Hospital) and 15 of primary and influenzal pneumonia with 12 deaths. There were in addition 2 cases of poliomyelitis, 1 of puerperal pyrexia, and 1 of erysipelas.

The number of notifications received in respect of tuberculosis was 38, the highest total for some years (37 in 1953), of which 35 related to the respiratory type of illness: 4 deaths resulted from this condition. At the end of the year the number of cases of tuberculosis on the register was 266, of which 213 were respiratory and 53 non-respiratory in type. Of this total 159 were males, and 107 females, shewing a continuing predominance of the former in the respiratory group and an equal sex distribution in non-respiratory cases.

There were no notifications of food poisoning, of meningitis, or of diphtheria during the year.

Despite very many and important advances in the control of contagious and infectious illnesses there has literally been no progress during the course of the last 50 years in the control of measles; measures to confer immunity do exist and can be administered in special circumstances, such as to protect the susceptible expectant mother in the early weeks of pregnancy should she be exposed to infection. But control of the periodic epidemics which every 2-3 years seem to affect susceptible young children—(and all *are* susceptible, unless protected by a previous attack)—throughout the length and breadth of the country seems as yet to be virtually impossible. Measles in itself is not, nor ever was, a serious illness; but its complications and sequelae used to be severe, and at one time caused a considerable death roll. Nowadays, with better child care, better economic conditions, better nutritional standards, better housing, and above all more effective therapy to control complications, a death due to measles is fortunately exceedingly rare. Nevertheless, considerable distress may be caused to the child and to the family, and some dislocation of education inevitably ensues for the school child; today these are the main drawbacks.

The total of 601 notifications is unfortunately a new high record incidence: in 1952 there were 480 cases; in 1953, 239; in 1954, 198; in 1955, 155; and in 1956 only 53.

Such a pattern of steadily decreasing incidence over a period is uncommon and the reason for it is not at all clear; more usually moderate outbreaks occur every 2-3 years. But this trend most certainly presaged the very heavy incidence now experienced throughout the district.

From the aspect of environmental hygiene the principal requirements of the Rural District remain unchanged: more new houses, and the repair and improvement of those older houses capable of such repair and improvement at reasonable expense: the demolition and clearance of “unfit” houses: completion of the main drainage and sewerage schemes for Padgate and Woolston on the east, and Sankey and Penketh on the west: the prevention of pollution, and the cleansing of streams and watercourses; and the maintenance

of full control of refuse tips in conformity with Ministry recommendations and standards. So far as the personal health services provided by the Local Health Authority under the appropriate sections of the National Health Service Acts and the Education Acts better school and general-purpose clinic premises are needed to facilitate adequate ante-natal care and supervision, and the care and supervision of school children, especially their dental care and supervision. During the year quite appreciable progress has been made in several of the parishes towards the completion of a satisfactory scheme for the care of the aged and the handicapped, but much still remains to be done in this field by the co-operation of voluntary bodies and associations and the “field-workers” of the Statutory Authority—health visitors, home nurses, home helps, occupational therapists and mental health workers.

The scheme of poliomyelitis vaccination was initiated last year, but was then limited to children born in the years 1947-1954 inclusive. This was extended during the current year to those born in the years 1955 and 1956 and subsequently also to expectant mothers, to all children under the age of 15, and to the families of general practitioners and ambulance staffs who desired this protection. Details of the “vaccinations” carried out during the year appear later in this report. Meanwhile, of course, “vaccinations” against smallpox, and “immunisations” against diphtheria, whooping cough and tetanus have continued, but with indifferent success: two out of every three babies born went unprotected against these diseases.

In concluding this Report, I should like to take the opportunity of thanking you, Mr. Chairman, and all Members of the Health Committee and of the Council, for your continued interest, support and encouragement during the year’s work: and I would also ask my fellow-officers, particularly the heads of Departments to accept my gratitude for their friendly co-operation in all matters of mutual interest and concern. To the staff of my own Department I am of course particularly indebted for their efficient and loyal service, especially to Mr. Morrison, your Chief Public Health Inspector, on whom responsibility for the day-to-day administration and work of the Department necessarily devolves. I may perhaps be forgiven for saying here how happy I am to lead such an effective and public-spirited team of workers in the field of Public Health.

I am,

Mr. Chairman, Madam and Gentlemen,

Yours obediently,

A. C. CRAWFORD,

MEDICAL OFFICER OF HEALTH.

SECTION I.

PHYSICAL CONDITIONS AND GENERAL DESCRIPTION.

The Warrington Rural District is situate in the South-west of the County of Lancaster. It is bordered on the North by the districts of the County Borough of St. Helens and the Urban Districts of Newton-le-Willows and Golborne; to the East is the Urban District of Irlam, and on the West is the Rural District of Whiston and the Borough of Widnes. The southern boundary, which is also the County boundary, is the Manchester Ship Canal, and the northern perimeter of Warrington County Borough.

The area of the district is approximately 35 square miles, being 14 miles from east to west, with a narrow waist of about two miles in the centre between Warrington and Newton, broadening to an average width of about six miles.

Agriculture is the principal occupation in the area, but there are in the more urban parishes a variety of industries, including tanning, light engineering, brewing, brick making and paint manufacture.

The area is, as a whole, comparatively low-lying with only a gentle undulation to relieve the otherwise flat landscape. The fall of the land is to the south, with the streams and brooks discharging into the River Mersey, which winds its way across the southern portion of the district only slightly to the north of the Manchester Ship Canal.

DISTRICT STATISTICS

Area (acres)	22,733
Estimated population, 1957	33,920
Number of inhabited houses and flats	7,951
Rateable value	£355,474
Sum represented by a 1d. rate	£1,450
Births assignable to district	528
Deaths assignable to district	366
“ Natural increase ”	162

SECTION II.

VITAL STATISTICS

BIRTHS :	M.	F.	Total
Live Births—Legitimate	284	232	516
Illegitimate	2	10	12
	<hr/>	<hr/>	<hr/>
	286	242	528
	<hr/>	<hr/>	<hr/>

Live Birth Rates—" Crude " 15·6; " Adjusted " 17·0 per 1,000 Population ; Comparability factor 1·09.

The " Adjusted " Live Birth Rate is the " Crude " Live Birth Rate after adjustment by a comparability factor supplied by the Registrar General.

	M.	F.	Total
STILL BIRTHS	5	2	7

Still Birth rate—13 per 1,000 total (Live and Still) Births.

DEATHS :	M.	F.	Total
General	201	165	366

Death Rates—" Crude " 10·8 ; " Adjusted " 11·4
Comparability factor 1·06.

The " Adjusted " Death Rate is the " Crude " Death Rate after adjustment by a comparability factor supplied by the Registrar General.

INFANT DEATHS (Deaths of Infants under 1 year of age) :
Total Infant Mortality Rate—27 per 1,000 live births.

	M.	F.	Total
Infant Deaths	9	5	14
Infant Mortality Rate of Legitimate Infants—27 per 1,000 live births.			
Infant Mortality Rate of Illegitimate Infants—Nil.			

NEO-NATAL MORTALITY :
Deaths of Infants under 4 weeks—10.
Neo-natal mortality rate—19 per 1,000 total live births.

MATERNAL DEATHS—Nil.
Maternal Death Rate—Nil per 1,000 total births.

VITAL STATISTICS—COMPARATIVE TABLE

YEAR	LIVE BIRTHS		DEATHS (ALL CAUSES)		STILLBIRTHS		MATERNAL MORTALITY		INFANT MORTALITY			CANCER MORTALITY			
	No. regis- tered	Rate per 1,000 popu- lation	No. regis- tered	Rate per 1,000 popu- lation	No. regis- tered	Rate per 1,000 total births	TOTAL		NEO-NATAL		No. of deaths regis- tered	Rate per 1,000 popu- lation	Per- centage of all deaths		
							No. of deaths regis- tered	Rate per 1,000 live births	No. of deaths regis- tered	Rate per 1,000 live births					
1957	528	*15.6	366	*10.8	7	13	Nil	Nil	14	27	10	19	69	2.0	18.8
1956	450	*12.5	338	*9.4	7	15	Nil	Nil	14	31	9	20	52	1.44	15.4
1955	439	*12.7	329	*9.5	11	24	1	2.22	11	25	9	21	46	1.33	13.9
1954	464	*12.9	331	*9.2	6	13	Nil	Nil	14	30	11	24	55	1.5	16.6
1953	481	12.8	331	8.8	10	20	Nil	Nil	14	29	9	19	54	1.4	16.3
1952	455	11.6	225	5.7	16	34	Nil	Nil	14	31	9	20	35	0.9	15.5
Average 5 years 1952—1956	..	12.5	..	8.5	..	21	..	0.4	..	29	..	..	48	1.31	15.5

*-ADJUSTED *1.09*
Live birth-rate (comparability factor, ~~1.25~~) @ 15.6 per 1,000
Death-rate (comparability factor, ~~1.11~~) @ ~~10.4~~ *10.8* per 1,000

COMPARISON OF BIRTH RATES, DEATH RATES AND ANALYSIS OF MORTALITY AND MORBIDITY.

	Warrington Rural 1956	England & Wales 1957	England & Wales 1957
	Rate per 1,000 population.		
BIRTHS—			
Live—Adjusted	15.6	17.0	16.1
Crude.....	12.5	15.6	
Still	0.3	0.20	0.37
DEATHS—			
All causes (Adjusted)	10.4	11.4	11.5
Typhoid & Paratyphoid Fevers....	0.00	0.00	0.00
Whooping Cough	0.00	0.00	0.00
Diphtheria	0.00	0.00	0.00
Tuberculosis all forms	0.22	0.12	0.11
Influenza	0.05	0.00	0.02
Smallpox	0.00	0.00	0.00
Ac. Poliomyelitis & Encephalitis ..	0.00	0.00	0.00
Pneumonia	0.36	0.38	0.50
NOTIFICATIONS—			
Typhoid Fever	0.00	0.14	0.00
Paratyphoid Fever	0.00	0.00	0.01
Meningococcal Infection	0.00	0.00	0.02
Scarlet Fever	0.86	0.70	0.66
Whooping Cough	0.43	0.53	1.89
Diphtheria	0.00	0.00	0.00
Erysipelas	0.08	0.00	0.08
Smallpox	0.00	0.00	0.00
Measles	1.46	17.67	14.11
Pneumonia	1.21	0.47	0.73
Ac. Poliomyelitis (including Polio- encephalitis) : Paralytic	0.05	0.00	0.07
Non-Paralytic	0.02	0.03	0.04
Food Poisoning	0.00	0.00	0.20
	Rate per 1,000 Live Births		
DEATHS—			
All causes under 1 year of age	31	27	23.0
Enteritis and Diarrhoea under 2 years of age.....	0.00	0.00	0.05
MATERNAL MORTALITY—			
Excluding Abortion	0.00	0.00	0.39
Due to Abortion	0.00	0.00	0.08
	Rate per 1,000 Total (Live & Still) Births.		
NOTIFICATIONS—			
Puerperal Pyrexia	0.00	0.00	0.26

DEATHS.

The total number of Deaths registered in the district was 296 ; 18 of these were of persons whose usual place of residence was outside the district ; these have been assigned to the areas in which they formerly resided.

88 deaths of persons normally residing in this area, but dying elsewhere, have been included in the total deaths properly assignable to this district.

CAUSES OF DEATH.

	Males	Females	Total
ALL CAUSES	201	165	366
Tuberculosis of respiratory system	1	3	4
Tuberculosis—other forms	—	—	—
Syphilis	1	—	1
Diphtheria	—	—	—
Whooping Cough	—	—	—
Meningococcal infections	—	—	—
Acute Poliomyelitis	—	—	—
Measles	—	—	—
Other infective and parasitic diseases	—	3	3
Malignant neoplasm, stomach	3	3	6
„ „ lung, bronchus	8	2	10
„ „ breast	—	7	7
„ „ uterus	—	3	3
Other malignant & lymphatic neoplasms..	23	18	41
Leukemia, aleukemia	1	1	2
Diabetes	—	2	2
Vascular lesions of nervous system	15	17	32
Coronary disease, angina	50	21	71
Hypertension with heart disease	3	4	7
Other heart diseases	39	48	87
Other circulatory disease	4	4	8
Influenza	1	2	3
Pneumonia	4	8	12
Bronchitis	11	6	17
Other diseases of respiratory system	3	1	4
Ulcer of stomach and duodenum	4	—	4
Gastritis, enteritis and diarrhoea	2	—	2
Nephritis and nephrosis	—	1	1
Hyperplasia of prostate	1	—	1
Pregnancy, childbirth, abortion	—	—	—
Congenital malformations	1	1	2
Other defined and ill-defined diseases	17	10	27
Motor vehicle accidents	5	—	5
All other accidents	3	—	3
Suicide	1	—	1
Homicide and operations of war	—	—	—

SECTION III.

NOTIFIABLE DISEASES DURING 1956

There were 683 cases notified during the year, excluding Tuberculosis. These tables show the number, by age groups, of Infectious Diseases notified, and the number removed to Hospital.

D I S E A S E	Total cases at all ages	Under 1	1—2	3—4	5—9	10—14	15—24	25 & Over	Total cases removed to Hospital	Cases occurring in Winwick Hospital
Scarlet Fever	23	1	2	4	10	6	..	..	5	..
Measles.....	601	15	118	159	293	13	2	1	1	..
Whooping Cough	18	2	7	4	5	..	..	..	1	..
Poliomyelitis.....	2	..	..	..	2	..	..	..	2	..
Typhoid Fever.....	5	Under 5	5—14	15—44	45—64	65 & Over			..	5
Pneumonia	15	..	4	..	6	5			..	6
Puerperal Pyrexia	1	..	..	1	..	..			1	..
Dysentery.....	17	2	2	7	2	4			..	12
Erysipelas.....	1	..	..	..	1	..			..	1
Food Poisoning .....	..	..	..	..	..	..			..	..

NOTIFIABLE DISEASES—COMPARATIVE TABLE

DISEASE	1957		1956		1955		1954		1953		1952		Mean of Years 52—56	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Scarlet Fever	23	..	31	..	34	..	63	..	51	..	53	..	46	..
Diphtheria	601	..	53	..	155	..	198	..	239	..	480	..	225	..
Measles	18	..	16	..	33	..	1	..	118	..	53	..	44	..
Whooping Cough	5	..	1	..	..	..	..	..	..	..	1	..	..	..
Enteric group Fevers	17	..	..	..	1	..	3	..	83	..	13	..	20	..
Dysentery .....	..	..	..	..	65	..	..	..	18	..	..	..	17	..
Food Poisoning .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Ophthalmia Neonatorum ..	1	..	..	..	1	..	..	..	..	..	3	..	1	..
Puerperal Pyrexia	2	..	3	..	..	..	..	..	..	..	2	..	1	..
Ac. Poliomyelitis and Polioencephalitis .....	..	..	..	..	..	..	..	..	..	..	..	1	..	..
Meningococcal Infection ..	..	..	..	..	..	..	..	..	..	..	..	1	..	..
Primary and Influenzal Pneumonia	15	12	44	13	8	11	22	15	23	13	19	6	23	12
Erysipelas	1	..	3	..	3	..	1	..	8	..	10	..	..	..
Tuberculosis respiratory ..	35	4	18	7	19	7	27	15	37	14	25	3	25	9
Tuberculosis non-respi- ratory	3	..	5	1	5	..	2	..	..	..	3	2	3	1
TOTAL	721	16	174	21	324	18	317	30	577	27	662	12	405	22

TUBERCULOSIS.

YEARS	NEW CASES				DEATHS			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M.	F.	M.	F.	M.	F.	M.	F.
0 .....	..	..	..	..	..	..	..	..
1 .....	..	..	..	..	..	..	..	..
5 .....	..	..	..	1	..	..	..	..
10	1	1	..	..	..	..	..	..
15	1	2	..	1	..	..	..	..
20	1	..	..	..	..	..	..	..
25 .....	..	1	1	..	..	..	..	..
35	3	2	..	..	..	..	..	..
45	5	4	..	..	..	2	..	..
55	4	4	..	..	1	1	..	..
65 and upwards	5	1	..	..	..	..	..	..
Totals	20	15	1	2	1	3	..	..
Grand Totals	35		3		4		..	

CASES OF RESPIRATORY AND NON-RESPIRATORY
TUBERCULOSIS ON REGISTER AT 31st DECEMBER

YEAR	Pulmonary			Non-Pulmonary		
	Males	Females	Total	Males	Females	Total
1953	81	50	131	21	19	40
1954	97	56	153	22	22	44
1955	106	58	164	24	23	47
1956	113	69	182	26	24	50
1957	132	81	213	27	26	53

SECTION IV.

FOOD HYGIENE.

FOOD AND DRUGS ACT, 1938.

The following details of food samples taken under the above Act, have been supplied by the County Medical Officer of Health.

A total of 164 samples was obtained, consisting of 110 samples of milk (four of which were samples of Channel Islands milk) and 54 others comprising:—

4 Sweets	1 Cinnamon—ground
4 Margarine	1 Caraway seeds
1 Condensed milk	2 Golden raising powder
5 Tomato sauce	3 Jam
5 Flour	1 Marmalade
2 Lard	2 Baking powder
2 Butter	1 Pie filling
3 Cheese	1 Blancmange
4 Flour confectionery	2 Pudding mix
2 Sausages—canned	1 Custard powder
1 Nutmeg—ground	5 Pickles
1 Cloves—ground	

With the exception of the two samples detailed below, all were reported by the County Analyst to be genuine:—

Sample No.	Type	Result of Analysis	Action taken
S.8982	Milk	Freezing point indicates 1.5% extraneous water.	Vendor cautioned and further sample obtained.
S.9345	Cheese	Fat content (calculated on Dry Matter) only 44.1%.	No action.

FOOD PREPARING PREMISES.

All premises used for the preparation and storage of food-stuffs, grocers, butchers, ice-cream suppliers and bakehouses were inspected. While the present standard of all premises may be classified as satisfactory the new Food Hygiene Regulations, coming into force in 1956 will mean quite an increase of work in this sphere. The supervision of canteens in factories, etc., is included in Section VII of this Report.

Food Preparing Premises

Type of Business	Number	Inspections
Grocers and Mixed General	61	152
Butchers	7	21
Fried Fish Shops	7	18
Cafes and Mobile Snack Bars	8	33
Ice-cream Vendors	29	

ICE-CREAM

Number of Retail Vendors registered	29
Number of Bacteriological samples taken	40
Result of samples	Grade 1 31
	Grade 2 7
	Grade 3 1
	Grade 4 1

In general it may be taken that Grades 1 and 2 are satisfactory and we thus have 2 unsatisfactory samples out of a total of 40.

There is no ice-cream manufactured in the area, and the retailers now registered sell pre-packed ice-cream only.

MILK SUPPLIES.

Routine milk sampling has continued throughout the year for the purpose of bacteriological analysis, which aims at ensuring a general standard of purity as regards the total number of organisms which affects the keeping quality of milk (Methylene Blue Tests), the efficiency of pasteurisation processes (the Phosphatase Test) and is concerned specifically as to the presence in the samples of the bacillus of tuberculosis, the bovine species of which is of course the cause of tuberculosis diseases in bones, joints and lymphatic glands, and may also attack other organs of the body.

The results of samples submitted to various tests are :—

Raw Milk	No. of Samples	No. Unsatis.
Tuberculosis—Biological Test	3	—

HEAT TREATED MILK

“ Pasteurised Milk ”		
Phosphatase Test	98	1
Methylene Blue Reduction Test	101	—
“ Sterilised Milk ”		
Turbidity Test	3	—

In all cases of positive results of test for tuberculosis information is forwarded to the Divisional Inspector of Ministry of Agriculture who arranges for veterinary inspections to be carried out at the farms concerned.

Licences issued under the Milk (Special Designation) Regulations were as follows :—

Designation	Regulations	Type of Licence	No. Issued.
Tuberculin Tested	Milk (Special Designation) Raw Milk Regs. 1949.	Dealer's	11
Tuberculin Tested	do.	Supplementary	8
Pasteurised	Milk (Special Designation) (Pasteurised & Sterilised Milk) Regs. 1949	Dealer's	19
Pasteurised	do.	Supplementary	14
Pasteurised T.T.	do.	Dealer's	8
Pasteurised T.T.	do.	Supplementary	7
Sterilised	do.	Dealer's	38
Sterilised	do.	Supplementary	8

INSPECTION OF MEAT AND OTHER FOODS.

The bulk of this work continues at a Bacon factory where line dressing is in progress and which places on the Inspector a responsibility which has to be resolved within probably no more than one minute. This duty is exacting and demands both mental and physical output which is not generally appreciated.

Carcases inspected and condemned.

	Cattle, Calves			Pigs			Sheep		
	1955	1956	1957	1955	1956	1957	1955	1956	1957
Number killed (if known) ..	Nil	Nil	Nil	52,198	53,925	59,475	Nil	782	624
Number inspected.....	Nil	Nil	Nil	52,198	53,925	59,475	Nil	782	624
All diseases, except T.B. :									
Whole carcases condemned..	Nil	Nil	Nil	52	38	107	Nil	Nil	1
Carcases of which some part or organ was condemned..	Nil	Nil	Nil	2,402	2,073	2,883	Nil	14	16
Percentage of the number inspected affected with disease other than T.B. ..	Nil	Nil	Nil	4.7%	3.9%	5%	Nil	0.17%	2.7%
Tuberculosis only :									
Whole carcases condemned..	Nil	Nil	Nil	142	155	130	Nil	Nil	Nil
Carcases of which some part or organ was condemned..	Nil	Nil	Nil	868	1,134	1,039	Nil	Nil	Nil
Percentage of the number inspected affected with Tuberculosis	Nil	Nil	Nil	1.9%	2.3%	1.9%	Nil	Nil	Nil

OTHER FOOD-STUFFS CONDEMNED.

Of the food inspected the following was voluntarily surrendered. This class of food-stuff is examined on special request or in the course of routine visits to food premises.

82 tins fruit.
37 tins meat.
60 tins vegetable.
6 tins milk.
4 tins soup.
3 tins pudding.
2 tins fish.
26 lbs. beef.
864 lbs. stewed steak.
8 lbs. lard.
180 lbs. dehydrated cabbage.
8,960 lbs. dried apple rings.

SLAUGHTER OF ANIMALS ACT, 1933 TO 1954.

There are 23 Slaughtermen holding licences granted by this Authority.

SECTION V.

HOUSING.

The number of inhabited houses and flats in the area is gradually rising and now totals 7,790. New construction is gaining pace and shows a most creditable increase since 1953, an increase which is due to private developers. The average number of houses completed by the Council each year since 1948 is 81 and this year private houses completed number 256.

Under the Housing Act 1949 and Housing Repairs and Rents Act, 1954, 18 applications were made for financial assistance for the improvements of housing accommodation, and 17 approved, and £1,949 was granted for this purpose. It is significant that these applications are, in the main, made by owner/occupiers. The number of cases qualifying for an increase of rent consequent on houses being put into a good state of repair was insignificant.

A survey of the applications for Council houses reveals that the number of families who "need" houses from a Public Health aspect is a small fraction of the total.

The vast majority of houses were erected after 1919, and the number of really bad houses is comparatively low, but the rehousing problem is still difficult.

New Council housing developments are extremely hampered by the lack of sewerage facilities and until such facilities exist considerable embarrassment must occur in certain parishes.

NEW HOUSES ERECTED.

	Prefabricated			Traditional		
	Temporary	Permanent		Permanent		
	1955	1956	1957	1955	1956	1957
Local Authority	Nil	Nil	Nil	87	57	Houses 49 Flats 24
Other bodies and persons ...	Nil	Nil	Nil	112	225	256

CARAVANS.

Under the Public Health Act, 1936, Local Authorities may grant Licences to persons to allow land occupied by them to be used as a site for caravans or to a person to permit him to occupy a caravan. There are special exceptions, but in general this may be taken to be the rule.

Standard conditions for site licences are in force and two sites are licensed. Personal licences were issued in 81 cases and the extent of this particular duty may be gauged by the fact that no less than 447 visits were made by Inspectors.

The following conditions are enforced in the case of personal licences:—

1. Provide suitable and sufficient sanitary accommodation.
2. Provide a suitable dustbin for the storage of refuse.
3. Provide an adequate water supply.
4. The waste water to be discharged over a trapped gulley connected to a suitable soakaway. The gulley to be surrounded with an area of cement concrete.
5. The Caravan to be sited on a hard standing.
6. The Site to be kept in a clean and tidy condition.

The use of a moveable dwelling in this area is purely for housing purposes ; either because permanent housing accommodation is required, or the occupier prefers to live in a caravan, or housing accommodation is required for a temporary period only. Fortunately, the bad type of occupant and the number of structurally unsatisfactory vans have been kept to a minimum by vigorous action.

INSPECTION OF EXISTING PROPERTIES.

INSPECTION OF DWELLING-HOUSES DURING THE YEAR.

- | | | |
|----|--|-------|
| 1. | (a) Total number of dwelling-houses inspected for housing defects (under Public Health and Housing Acts) | 517 |
| | (b) Number of inspections made for the purpose | 2,733 |
| 2. | Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation | 37 |
| 3. | Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not in all respects reasonably fit for human habitation..... | 466 |

REMEDY OF DEFECTS DURING THE YEAR WITHOUT SERVICE OF FORMAL NOTICES.

- | | |
|---|-----|
| Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers | 207 |
|---|-----|

ACTION UNDER STATUTORY POWERS DURING THE YEAR.

(a) Proceedings under Sections 9, 10, and 16 of the Housing Act, 1936:

(1) Number of dwelling-houses in respect of which notices were served requiring repairs	Nil
(2) Number of dwelling-houses which were rendered fit after service of formal notice:—	
(a) By Owners	Nil
(b) By Local Authority in default of owners ..	Nil

(b) Proceedings under Public Health Acts

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	170
(2) Number of dwelling-houses in which defects were remedied after service of formal notices:—	
(a) By Owners	120
(b) By Local Authority in default of owners ..	11

(c) Proceedings under Sections 11 and 13 of the Housing Act, 1936:

(1) Number of dwelling-houses in respect of which Demolition Orders were made.....	Nil
(2) Number of dwelling-houses demolished in pursuance of Demolition Orders	Nil

(d) Proceedings under Miscellaneous (General Provisions) Act, 1953..... 35

LEGAL ACTION.

<i>Case</i>	<i>Nuisance</i>	<i>Court decision.</i>
No. 1	Various.	4th December, Case adjourned for 1 month.

SECTION VI.

SANITARY CIRCUMSTANCES OF THE AREA.

WATER SUPPLY.

A piped supply of water extends throughout the area, with the exception of some isolated farms and cottages. The principal supplier is Warrington Corporation, but a small area of Cuerdley parish is supplied by Liverpool Corporation.

Efforts have been made by the Warrington Corporation to increase the supply in these particular parishes but not entirely with success.

The number of houses without a proper supply of water within the house is gradually being reduced and the table below indicates how small these cases now are.

The following samples have been taken :—

	Type			
	Bacteriological		Chemical	
	Satisfactory	Unsatis.	Satisfactory	Unsatis.
15 Samples	7	3	1	4

From Public Mains				From Private supplies, e.g. wells, springs, etc.	
PARISH	Direct to houses	By means of stand pipe			
	No. of dwelling houses	No. of dwelling houses	No. of population	No. of dwelling houses	No. of population
Burtonwood	751	2	8	3	10
Croft	476	..	..	1	3
Cuerdley	47	..	..	..	..
Penketh	1,332	..	..	..	..
Poulton	1,703	..	..	2	4
Rixton	562	..	..	1	3
Sankey	1,657	1	3	..	..
Winwick plus					
Mental Hospital	463	1	3	..	..
Woolston	949	..	..	..	..
Totals	7,940	4	14	7	20

RIVERS AND STREAMS.

The area is traversed from north to south by two main streams—the Sankey Brook and the River Glaze. Across the southern boundary runs the River Mersey, the eventual outlet for these streams. There are several smaller brooks winding through the area, but none of any particular note.

The fact that these brooks exist seems to have provided a wonderful opportunity for building development—a ready-made drainage system to hand. The rapid development of the area since the middle twenties has now changed these brooks into open sewers.

The development of proper sewerage systems are required to remove the extensive pollution and, until this occurs, then our rivers and streams will remain as such in name only.

DRAINAGE AND SEWERAGE.

The drainage from over 70 per cent. of the properties in this area consists of treatments in a septic tank with a subsequent discharge of the effluent into the nearest ditch or stream.

The cleansing of these septic tanks and ditches is carried out by the Surveyor's Department by means of a mechanical cesspool emptier. In general, efforts are made to cleanse each tank once each twelve months and this is done as a charge on the rates.

A small settling tank and circular filter deals with an estate in Glazebrook, but the effluent is unsatisfactory. A small treatment works dealing with effluent from a Council housing estate has been gradually improved although its position leaves much to be desired; regular maintenance has kept it free from nuisance. The remaining sewage drains via septic tanks of varying size and construction to the open sewers, i.e. the streams.

Four samples of effluent were taken during the year and the results were as follows :—Satisfactory, 2 ; Unsatisfactory, 2.

Several schemes are in hand for the sewerage of the more urbanised parishes.

A scheme for the parishes of Poulton-with-Fearnhead and Woolston is in progress, but it will be some years before completion.

A revised scheme for Penketh and Great Sankey has been approved and it is hoped that a general starting date will soon be fixed. At present sewers are being laid only in those highways which are due for improvement.

With the exception of the treatment works the Sankey Valley scheme is now almost completed. A main drainage scheme has been completed in Winwick. At Croft a disposal works has been developed for the existing and proposed Council estate together with the central area of the village proper.

Conversions have commenced in Burtonwood and Collins Green since the extension and improvements of sewers with outfalls into the Sankey Valley Scheme.

A sewage treatment works scheme is now nearing completion for the Hollins Green area of Rixton.

The next few years will show a big change in sewerage facilities and the completion of the schemes now in hand and provisaged will see the fruition of many years hard work.

PUBLIC CLEANSING.

The collection and disposal of refuse, together with its ancillary functions by the Local Authority, is under the control of the Chief Public Health Inspector. The collection service, which is weekly, is carried out by special-type refuse vehicles, with loaders' cabs. Due to the fairly long distances that machines have to travel from the depot, the inclusion of the loaders in the driver's cab is obviously a desirable feature. Certainly the weather protection and additional safety provided appear to be thoroughly appreciated by the workmen.

The collection of pail contents is carried out weekly by a similar machine. A detachable tank is mounted on rollers inside the body, a method which simplifies both loading and unloading. Supplies of both liquid and powder disinfectants are carried in order that pail compartments and pails may be treated as required. This procedure is far from satisfactory, but is probably as effective as any other under the circumstances. The only solution to this problem is the conversion of the pail closets as rapidly as possible to a water-carriage system.

All workmen are provided with protective clothing, and although this provision is by no means cheap, yet it is a feature that is now a necessity if workmen are to be encouraged to engage in this class of work.

The provision of dustbins and sanitary pails is carried out by the Local Authority as a rate charge and enables unsatisfactory bins and pails to be replaced with the minimum of delay. The storage of refuse at the home, pending collection, must obviously be in a hygienic manner, and this can only be effected by the provision of a proper receptacle. B.S.S. bins are purchased in bulk and delivered weekly. Weekly reports are received from each driver, of the bins and pails requiring replacement, the addresses are checked in a card index file, the bin or pail is inspected, and delivery receipts are signed by the householder. Where a bin is being mis-used, a visit is paid by an inspector, when the householder is warned that they will be held liable for replacement. Three sizes of bins are issued— $3\frac{1}{4}$, $2\frac{1}{2}$ and 2 cubic feet, the size of bin being decided by the type of house and size of family.

A scheme for the quarterly inspection of vehicles by a sub-committee at which points are awarded for maintenance and cleanliness has provided a competitive spirit in this work, and the monetary prizes awarded appear to take second place to the pride which the winning driver takes in his achievement. This scheme has raised vehicle care and maintenance to a higher level and ensures that each driver becomes fully cognizant of what is required of him.

The disposal of dry refuse takes place at several tips throughout the area, and, although sometimes they are not as "controlled" as one would wish, they are a decided improvement over past methods of disposal. A Howard Bulloader is used to excavate soil and cover the tipping sites. Wire netting screens are provided to prevent nuisance by blowing paper, and all reasonable steps are taken to ensure that the sites are satisfactory. The refuse from the Burtonwood Base is tipped at Winwick and because of its nature causes much more trouble than ordinary household refuse.

The gradually increasing number of houses of the semi-detached and detached type, and the conversion of hostel sites into flats has, because of long carries, considerably increased the collection time since the end of the war. A special twice-weekly collection of refuse is made from certain hostel sites. For these additional services a special charge is made.

STATISTICS:

Machines employed—

Karrier Dual Tip, Diesel	1
Karrier Bantam with "Derby" body	2
Karrier CK.3, with "Derby" body	3
Karrier CK.3, Refuse Collector, with standard steel body	1
Karrier Gamecock	1
Commer van	1
Trailers	3
Platypus Tractor	1

Workmen—

Number of Drivers	8
„ „ Labourers, all classes	24
Foreman	1

Dustbins and Pails—

Number of Dustbins provided	628
„ „ Pails provided	77

Income from Trade Refuse collections	£204.7.6
Income from Refuse Disposal	£603

SALVAGE.

The direct collection of salvage has been confined solely to waste paper and cardboard. Due to the scattered nature of the area and the number of tipping sites, it is not considered that other materials could be separated and sold at a profit.

The collection of waste paper is made by means of large, covered trailers behind a refuse collection vehicle. The provision of a smart trailer serves a two-fold purpose—a good advertisement, and, secondly, an eminently suitable collection method.

Shops and large business premises are visited once each week by a special vehicle. The sorting of paper at tips is not as thorough or as satisfactory as one would wish, due to the soiling of paper after mixing with household refuse.

STATISTICS :

The amount of waste paper sold during the last three years was as follows :—

	tons	cwts.	qrs.	£	s.	d.
1955	320	9	3	2,880	6	4
1956	360	0	3	2,967	3	6
1957	304	8	3	2,490	12	3

A bonus is paid to workmen on the weight of paper collected each month above a fixed datum figure. Salvage prices have continued to fluctuate. This trend has enabled only a reasonable income to be obtained, in spite of the fact that this is the highest amount of paper ever collected. The reduction in the amount of paper collected is due to the limitation of sales by the purchasing company.

RODENT CONTROL.

The recommendations of the Ministry of Agriculture and Fisheries are pursued in this sphere of work. One operative is engaged whole-time and one part-time, and the methods used are those recommended by the Ministry. Both the operative and the general foreman have undertaken special instruction courses organised by the Ministry.

All Local Authority's properties, refuse tips, sewerage works, etc., were regularly inspected and treated. The sewers and sewer ditches were test-baited and treated where necessary.

On private properties treatment is carried out by agreement. Private houses are charged where the costs are recoverable, but all business premises are charged the full cost of treatment. The two offensive trade factories are both classed as areas of reservoir infestation, and both have private contracts in force with service operators.

This work is now the duty of a Local Authority, and effective measure must be undertaken to ensure that the rat population is kept to a minimum. The interest of the Central Authority is obvious by the fact that a 50 per cent. grant on approved expenditure is obtained from the Ministry of Agriculture and Fisheries.

STATISTICS :

The number of infestation treatments were as follows :—

	Major.	Minor.
Business premises	—	4
Private dwellings	—	104
Local Authority	—	10

In addition, 89 manholes were test-baited.

SMOKE ABATEMENT.

Regular observations have been made of all factory chimneys for smoke emission. No serious problem is created in the area, but where necessary informal steps have been taken to bring to the notice of the management the nuisance being created. It is pleasing to note that in this branch of work pleasant and effective relations are maintained with the factory managers, so that formal proceedings have been completely unnecessary.

VERMINOUS AND FILTHY PREMISES.

The days when the serious infestation by bugs, of numbers of houses, seem to have gone, certainly so in this district. The residual toxicity of D.D.T. seems to have provided a long-awaited answer to the problem. Very few houses required treatment and, of these, the infestations were not heavy.

OFFENSIVE TRADES.

There are two offensive trades in the area, only one of which is in full production. The trades carried out are fat extraction, bone boiling, and glue making. One factory is also combined with a Knackers' yard and produces pet foods.

Control is exercised by means of issuing quarterly licences only to each factory. This procedure is considered more effective than the issue of statutory notices.

To prevent flies, each factory carries out spray patrol, whereby the whole of the premises are treated with D.D.T. insecticides. This system has proved of marked benefit.

Premises in Risley, used for breeding maggots for use as fish bait, not legally an Offensive Trade, have been regularly visited to ensure that a reasonable standard of cleanliness and control is maintained.

This class of work takes up a surprising amount of inspectorial time, particularly in the warmer months of the year, and yet it is only by maintaining regular and continued visits that satisfactory results are obtained.

SANITARY ACCOMMODATION OF HOUSES AND SCHOOLS.

The fact that the majority of houses in the area are of comparatively modern construction, and that ditches and streams were available for the discharge of effluents has, in spite of the lack of sewerage systems, been responsible for the majority having water closets with treatment by means of a septic tank. Over 70 per cent. of the houses in the district are so fitted. The remaining number are provided with pail closets.

Conversions are now being carried out in the Parishes and Townships of Burtonwood, Collins Green and Winwick.

The position at the 31st December was as follows :—

W.C. Conversions completed at Burtonwood and Collins Green	117
W.C. Conversions completed at Winwick	4
W.C. Conversions in progress at Burtonwood and Collins Green	14
W.C. Conversions in progress at Winwick	1

The sewerage scheme in Poulton and Woolston is not yet at such an advanced state of development when the question of conversions can be considered.

SECTION VII.

INDUSTRIAL AND COMMERCIAL CIRCUMSTANCES.

FACTORIES ACT, 1937.

There are now 39 factories registered in the area, the principal ones being engaged in tanning, light engineering, wire-rope making and brewing. Routine inspections have been made and the attention of H.M. Inspector of Factories has been drawn to matters within his jurisdiction.

Particular attention has been paid to the standards of hygiene practised in the canteens. Some of these are maintained and run to the highest standards, but in others, constant supervision is necessary. A special approach is made to each manageress and staff to ensure that scrupulous attention is paid to personal hygiene. Circulars and posters have been provided for use within the canteens and kitchens.

Number of Canteens : 15.

Good co-operation has existed with all factory managements and in no case has there been any necessity for statutory action on any of the matters for which the Local Authority is responsible.

SHOPS AND OFFICES.

Certain duties in the inspection of shops devolve on this Authority and certain others on the County Council. The inspectoral duties of the County Council have now been delegated to this Authority. The procedure is for half-yearly reports to be sent to the County on the matters for which it holds responsibility for action to be taken where necessary. It is unfortunate that this procedure tends to discourage the Inspector concerned from taking more than a cursory interest in this sphere of work.

It has not been found necessary to take statutory action to secure any of the requirements under the purview of this Council, all recommendations having been dealt with informally.

SHOPS.

<i>Type of Business.</i>	<i>Numbers</i>
Grocers and Mixed General	70
Greengrocery and Fruiterers	5
Butchers	7
Fried Fish Shops	7
Cafes and Mobile Snack Bars	8
Newsagents	8
Hardware	6
Drapers	4
Hairdressers	3
Chemists	2
Post Offices	2
Boot Repairers	1
	<hr/>
	123
	<hr/>

PETROLEUM AND CARBIDE STORAGE.

The number of Licences issued for the storage of Petroleum and Carbide of Calcium are as follows :—

Number of Licences to store Petroleum	61
„ „ gallons of storage capacity	73,860
„ „ Licences to store Carbide	2
Total amount of Carbide permitted .....lbs.	1,344
Number of Licences to store other spirits	6
Total amount of Fees paid :—	£ s. d.
Petroleum	43 5 0
Carbide of Calcium	1 0 0
Cellulose	1 10 0
	<hr/>
	£45 15 0
	<hr/>

The renewal of licences for the storage of petroleum and carbide is at the end of each year. Inspections of premises have been made with particular attention to new premises and the testing of underground storage tanks at the older petrol stations.

MEANS OF ESCAPE IN CASE OF FIRE.

Inspections have been carried out under the Public Health Act 1936 and the Factories Act 1937 to ensure that adequate means of escape in case of fire are provided to the type of premises controlled. Owing to the frequent changes which take place in factory organisations, these inspections and the preparation of certificates involve your Inspectors in a considerable amount of work.

Eleven visits were made and the number of Certificates issued was nine.

SECTION VIII.

SUMMARY OF PUBLIC HEALTH INSPECTOR'S VISITS

1957

Water supply	85
Drainage	728
Stables and Piggeries	7
Offensive Trades	40
Fried Fish Shops	12
Tents, Vans and Sheds	447
Factories	60
Workplaces	4
Licensed Premises	18
Refuse Collection	517
„ Disposal	231
Defective Bins	703
„ Pails	96
Rats and Mice	139
Atmospheric pollution	34
Schools	25
Shops Act	246
Salvage	195
Petroleum	46
Rent Act 1957	36
Means of Escape in Case of Fire	11
Improvement Grants	22
Conversions	1,885
Miscellaneous	218

UNDER PUBLIC HEALTH ACTS.

Number of houses inspected	266
Visits paid to above houses	630

UNDER HOUSING ACTS.

Number of houses inspected	81
Visits paid to above houses	218

OVERCROWDING.

Number of houses inspected	5
Visits paid to above houses	15

VERMINOUS PREMISES.

Number of houses inspected	4
Visits paid to above houses	10
Miscellaneous Housing Visits	224

INFECTIOUS DISEASE.

Inquiries in cases of Infectious Disease	61
Visits <i>re</i> disinfection	27
Miscellaneous Infectious Disease visits	8

INSPECTION OF MEAT AND OTHER FOODS.

Visits to Slaughter-houses	377
„ „ Butchers	8
„ „ Grocers	52
„ „ Greengrocers and Fruiterers	5
„ „ Dairies and Milkshops	11
„ „ Ice-cream premises	11
„ „ Food preparing premises	119
„ „ Restaurants	18
„ „ Canteens	66

Milk samples :—

Bacteriological	99
T.B.	3
Ice-cream samples	23
Miscellaneous food visits	5

SECTION IX.

PROVISION OF GENERAL HEALTH AND ANCILLARY SERVICES IN THE DISTRICT.

(1) LABORATORY ARRANGEMENTS.

Public Health Laboratory Service and County Analyst's Department.

Pathological specimens, samples of milk, food, "swabs", etc., for bacteriological investigation are dealt with by the Public Health Laboratory Service, either at the Public Health Laboratory, Mount Pleasant, Liverpool, or the Laboratory at Monsall Hospital, Monsall, Manchester. The chemical analysis of water supplies and of samples of food and drugs is undertaken at the County Analyst's Department, County Offices, Preston.

(2) HOSPITAL ARRANGEMENTS.

(Liverpool Regional Hospital Board : Warrington and District Hospital Management Committee).

The district contains no general hospitals within its boundaries, but it is, of course, well served by those within the County Borough of Warrington, the Warrington Infirmary and the General Hospital Warrington, for both general and specialised types of cases, e.g., orthopaedic and maternity cases; the latter type of case from the Rural District is admitted also to the Warrington Maternity Home, Victoria Park, Latchford. Cases of infectious disease (other than Smallpox) requiring hospital treatment are accommodated at the Isolation Hospital, Warrington; cases of Smallpox, should these occur, are admitted to the special Smallpox Hospital at Rock Ferry, Cheshire, belonging to the Port of Liverpool Sanitary Authority, or to Fazackerley Hospital, Liverpool.

In addition to the above, accommodation in hospitals administered by the St. Helens and District Hospital Management Committee is not uncommonly utilised by residents in the Rural area, particularly in the County Hospital, Whiston, for maternity cases. Finally, cases requiring highly specialised treatment for pediatric, orthopaedic, ophthalmic, gynaecological and ear, nose and throat defects may be admitted, by arrangement, to any of the "teaching hospitals" attached to the Universities of Liverpool or Manchester.

(3) AMBULANCE ARRANGEMENTS.

Full responsibility for the Ambulance Services to be provided under Section 27 of the National Health Service Act rests with the Lancashire County Council, as the Local Health Authority. This

Rural District, enclosing as it does the northerly boundaries of the Warrington County Borough, for its greater part is serviced by ambulances of the County Borough operating on behalf of the County Council, the parishes so served being those of Penketh, Great Sankey, Burtonwood (part), Winwick (part), Croft, Poulton-with-Fearnhead, Woolston, and Rixton-with-Glazebrook. The remainder of the district is served directly by the County Ambulance Service from the ambulance stations at Newton-le-Willows (Newton-le-Willows 2013), which deals with the northerly parts of the parishes of Burtonwood and Winwick, and at Mill Brow, Widnes (Widnes 2121), which deals with the Parish of Cuerdley.

Cases conveyed by ambulances from the Newton-le-Willows and adjoining county stations during the year totalled 886, of which 121 were urgent, and 765 non-urgent cases. In addition, the County Borough Ambulance Service, on behalf of the County Council, transported 228 emergency, 1,682 general and 16 infectious cases, making a total of 1,926, and a combined total of 2,812.

(4) TREATMENT CENTRES AND CLINICS.

School Health Service : School Clinics.

Schoolchildren in attendance at schools within the Rural area who require advice and treatment at a school clinic are referred to the Clinics at Widnes, Prescot, Earlestown and Cadishead, where general medical advice and treatment facilities for minor ailments, dental, ophthalmic and orthopaedic and speech defects are available. Cases requiring Child Guidance are usually referred to the Child Guidance Clinic at Huyton.

It is, however, a matter for great regret that no school clinic premises are available in the area at which special inspections could be carried out and specialist advice and treatment (ophthalmic, orthopaedic and, of course, dental) obtained. However, to give really effective cover to the district from the school health aspect would mean two clinics, one in the Penketh and Sankey and one in the Padgate and Woolston areas, and this provision can hardly be justified by the school population concerned. Both districts are, however, growing rapidly and the provision of a School Clinic at Woolston is now approved in principle.

Child Welfare Centres.

Sessions are held at the Infant Welfare Centres detailed below. At these centres medical and nursing advice is available for all infants and for children of pre-school age, also for expectant mothers, and those recently confined, in relation to matters affecting their general health. Supplies of a variety of infant foods, vitamin preparations, etc., are also available at cost price, together with

National Dried Milk, Orange Juice and Cod Liver Oil, the "Welfare Foods", formerly distributed under the auspices of the Ministry of Food. In addition, in special cases, schoolchildren may be examined and parents advised, although, of course, this is not a recognised feature of Infant Welfare Centre work.

(a) BURTONWOOD :

Methodist Sunday School, Phipps Lane.
 Medical Officer—Dr. H. G. M. Bennett.
 Health Visitor in charge—Miss I. Heap.
 Sessions—Weekly, each Thursday, 10.0 a.m. - 12 noon.

(b) CROFT :

Memorial Institute, Mustard Lane.
 Medical Officer—Dr. H. G. M. Bennett.
 Health Visitor in charge—Mrs. E. I. Griffiths.
 Sessions—Fortnightly, alternate Mondays, 2.0 - 4.0 p.m.

(c) PADGATE :

Methodist Sunday School, Padgate Lane.
 Medical Officer—Dr. H. G. M. Bennett.
 Health Visitor in charge—Miss S. M. Hart.
 Sessions—Weekly, each Wednesday, 2.0 - 4.0 p.m.

(d) PENKETH :

Methodist Sunday School, Chapel Lane.
 Medical Officer—Dr. H. G. M. Bennett.
 Health Visitor in charge—Miss W. Henry.
 Sessions—Weekly, each Monday, 2.0 - 4.0 p.m.

(e) SANKEY :

Eagle Sports Club, Hood Lane.
 Medical Officer—Dr. H. G. M. Bennett.
 Health Visitor in charge—Miss W. Henry.
 Sessions—Weekly, Friday, 2.0 - 4.0 p.m.

(f) WINWICK :

Methodist Church Hall, Golborne Road.
 Medical Officer—Dr. H. G. M. Bennett.
 Health Visitor in charge—Mrs. E. I. Griffiths.
 Sessions—Fortnightly, alternate Thursdays, 2.0 - 4.0 p.m.

(g) WOOLSTON :

Old Church of England School, Warren Lane.
 Medical Officer—Dr. H. G. M. Bennett.
 Health Visitor in charge—Miss S. M. Hart.
 Sessions—Fortnightly, alternate Thursdays, 2.0-4.0 p.m.

During the year under review the following attendances were made at the above Welfare Centres :—

Number of individual children attending :

Born in 1957	321
„ „ 1956	277
„ „ 1952—55 (mean)	258
	<hr/>
Total	856
	<hr/>

Number of attendances made by children :

Under 1 year of age	4,959
1 - 2 years of age	1,587
2 - 4 „ „	1,633
	<hr/>
Total	8,179
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In addition, expectant mothers made 182 attendances at these Centres.

(5) MIDWIFERY ARRANGEMENTS.

Domiciliary. One whole-time domiciliary midwife and five district nurse/midwives are engaged on this work within the Rural District in the employment of the County Council, which is both the Local Health Authority and the Supervising Authority under the Midwives Acts. These ladies normally accept responsibility for cases residing within reasonable proximity of their homes, but the principle of the expectant mother's free choice of midwife (as of doctor), is well established. Each has a car at her disposal to enable her to respond quickly to urgent calls and to carry apparatus for analgesia.

The names and addresses of these ladies are :—

WHOLE-TIME MIDWIFE :

Mrs. M. A. Lawton, 21 Marina Avenue, Sankey. Tel. No. Warr. 33236.

WHOLE-TIME NURSE/MIDWIVES :

Mrs. M. A. Taylor, 16 Hawthorne Grove, Paddington. Tel. No. Warr. 33664.

Mrs. T. F. McConnell, 56 Haley Road South, Burtonwood. Tel. No. Newton 3217.

Mrs. K. M. McCarron, 20 Brookside Avenue, Sankey. Tel. No. Penketh 2147.

Mrs. D. Woodward, 23 Bevin Avenue, Culcheth. Tel.
No. Culcheth 2110.

Mrs. V. M. Gibbins, 300 Padgate Lane, Padgate. Tel.
No. Warr. 34755.

A total of 209 babies were born in their own homes during the year ; with possibly one or two exceptions, their mothers were either actually delivered, or attended, by the midwives and nurse/midwives detailed above. Only one case of Puerperal Pyrexia was recorded during the year—a high tribute to the standard of midwifery displayed.

(6) HEALTH VISITING ARRANGEMENTS.

This work has been carried out by four whole-time and fully trained Health Visitors, who combine with health visiting duties those of School Nurse. These domiciliary visits, so necessary from the standpoint both of the supervision and of the health education of the families, are, of course, complementary to the work carried out at the Child Welfare Centre, as described above.

The names and addresses of the Health Visitors are :—

for Sankey, Penketh and Cuerdley :

Miss W. Henry, 38 Greens Road, Whiston, Prescot.

for Padgate and Woolston :

Miss S. M. Hart, 13 Dovedale Road, Liverpool, 18.

for Burtonwood :

Miss I. Heap, “ Maynard ” Belvedere Road, Newton-le-Willows.

for Winwick and Croft :

Miss E. I. Griffiths, 49 Golborne Road, Lowton, via Warrington.

(7) HOME NURSING ARRANGEMENTS.

Home nursing is undertaken by four whole-time nurse/midwives and one whole-time nurse.

The demand for their services has continued to grow during the year, and although part-time relief nurses have also assisted from time to time, an extension of the staff is contemplated within the near future. An increasing proportion of the Nurses' work is made up of cases requiring “ Injections ” of various drugs and medicaments.

The names and addresses of the Nurses are :—

Mrs. M. A. Taylor, 16 Hawthorne Grove, Paddington.
Phone No. : Warrington 33664.

Mrs. V. M. Gibbins, 300 Padgate Lane, Padgate.
Phone No. : Warrington 34755.

Mrs. T. F. McConnell, 56 Haley Road South, Burtonwood.
Phone No. : Newton-le-Willows 3217.

Mrs. K. M. McCarron, 20 Brookside Avenue, Sankey.
Phone No. : Penketh 2147.

Mrs. J. Green, 5 Delamere Avenue, Lowton.
Phone No. : Leigh 2150.

(8) HOME HELP ARRANGEMENTS.

This is "permissory" service provided by the County Council through No. 10 Divisional Health Committee, and is one which is not necessarily provided free of cost to the public. Its aim is to provide domestic help, when required, by reason of the presence in a household of sickness, pregnancy, mental deficiency, or to assist in the care of a child or children under school-leaving age. The service has expanded considerably and steadily as members of the public have become more fully aware of the facilities provided, and the low cost to the beneficiary, if indeed any. A very high proportion of the Service given is for the benefit of aged persons.

The Home Helps engaged are all part-time "Helps"; no whole-time workers are employed.

The Home Help Organiser, and the Assistant Home Help Organiser are :—

Organiser : Miss P. M. Butler.

Assistant : Miss M. MacLean.

Both these ladies may be communicated with at the Divisional Health Offices, Winwick. (Tel. Warrington 33144.)

During the current year a total of 43 Home Helps, all part-time workers, assisted 190 cases within the Rural District, each "Help" working on average a 25-hour week. Assuming that the help provided followed the same pattern and proportion shewn throughout No. 10 Health Division, this means that each case received approximately three hours' help for just over three days per week during the year : and that the total hours of service given amounted to 41,420.

The help was given to people in a number of categories : the confinement cases, the sufferer from tuberculosis, the aged and infirm, those suffering from long-continued and chronic illnesses, or "other unspecified illness". In the Rural District, of the 190 cases helped, 72 were under the age of 65, and 118 were aged 65 or over.

(9) MENTAL HEALTH ARRANGEMENTS.

The district is covered for this purpose by two full-time Authorised Officers of No. 10 Health Division and by a lady mental

health worker, who deal with the various aspects of mental health, including all cases in which investigation, supervision and appropriate action is required under the Lunacy Acts, Mental Deficiency Acts and Mental Treatment Act. The names and addresses of these officers are :—

Mr. F. Griffin, Haydock Park Cottage, Newton-le-Willows.
Phone No. : Ashton-in-Makerfield 7419.

Mr. D. Ryan, 2 Hazelbeech Close, Liverpool, 11.
Phone No. : Liverpool Stanley 4521.

Miss M. V. Phillips, Divisional Health Offices, The Old Rectory, Winwick.

It will be appreciated that, owing to the character of the Duly Authorised Officers' duties, whole time, twenty-four hour cover is given to this type of work.

(10) ARRANGEMENTS FOR THE PREVENTION OF ILLNESS, CARE AND AFTER-CARE (INCLUDING TUBERCULOSIS) AND THE PROVISION OF CONVALESCENT ACCOMMODATION.

(1) Responsibility for the above rests with the Local Health Authority partly on an obligatory and partly on a permissive basis ; "illness" includes mental defectiveness. The scope of such arrangements is very wide, and includes all the methods of health education and propaganda relating to health matters, health visiting in the homes, (including those of persons suffering from Tuberculosis), the provision of nursing and ancillary equipment, the after-care of patients who have suffered from illness either at home or in hospital, and the provision of convalescent accommodation and rehabilitation where this is required, to enable those recently sick to regain full health and strength.

(2) Responsibility for the supervision of cases of tuberculosis in the homes and for that of family contacts, to ensure appropriate examination and advice by the Chest Physician, now devolves on a single health visitor, covering the whole of the Rural District, and working in the closest contact with the Chest Physicians at clinics in Warrington, Widnes and Newton-le-Willows. The name and official address of the Health Visitor and details of the Chest Clinic sessions concerned with Rural District cases are given below :

Miss M. Monks, c/o Divisional Health Office, The Old Rectory, Winwick.

CHEST CLINICS :

Warrington General Hospital :—

Sessions : Tuesday evening, 5.0—6.30 p.m. ; Wednesday, 2.0—4.0 p.m. ; Friday, 9.0—11.0 a.m.

Widnes, Chapel Street :—

Sessions : Monday, Tuesday and Friday ; 2.0—4.0 p.m.

Newton-le-Willows Chest Clinic, Cottage Hospital, Bradlegh Road :—

Sessions : Monday, 9.0 a.m.—12 noon ; Wednesday, 9.0 a.m.—12 noon.

HEALTH EDUCATION.

As regards Health Education (a very important and essential factor in the prevention of illness), it is pertinent here to emphasise that although some responsibility for this section of preventive medicine may be accepted (as has been the case) by the Local Health Authority, the permissive power of the Council as a Local Sanitary Authority to carry out measures of health education under Section 179 of the Public Health Act, 1936, is still extant and should, in my view, continue to be exercised.

VACCINATION AND IMMUNISATION ARRANGEMENTS.

Vaccination and immunisation against diphtheria are available to all who desire it for themselves or for their children, either through the family doctor (who undertakes it at his home or at his surgery as part of his duties to the patient) or, on request, by appointment. Such services may be obtained at one of the immunisation sessions which are held at approximately monthly intervals in schools at Great Sankey, Penketh and Padgate. Immunisation of infants and small children is also undertaken—when circumstances warrant—at the Child Welfare Centres at Burtonwood, Winwick, Croft and Woolston.

The position in regard to diphtheria immunisation, and to small-pox vaccination, can only be regarded with gloom and foreboding. Despite the added attraction of the practicability nowadays of protecting small infants and young children, not only against the possible menace of diphtheria, but against whooping cough and tetanus, through the use of *only one triple-purpose antigen*, there seems to be but little improvement (1%) in the proportion of children obtaining such protection (60%). Possibly this may to some extent, be influenced by the unfortunate publicity which has been given to the association between immunisation and the “provocation” of poliomyelitis of the paralytic type ; but in my view it is simply the result of parental indifference and apathy which springs from failure to appreciate diphtheria as it used to present itself a generation ago. Much the same reasons, I suggest, are behind the general failure to secure protection against small-pox by vaccination. In both, however, the family doctor could do a great deal to influence parents wisely ; and Medical Officers of Health, I suggest, are entitled to look to him (or her) to do so.

During the year, a total of 274 children under 15 years of age completed the full course of immunisation against diphtheria of which 259 were under the age of five years. In addition to the above, 186 children all of school age, received reinforcement or “booster” injections, making a grand total of 460.

The percentage proportion of the estimated child population (under the age of 15 years) in an immunised state as at 31st December, 1957, was 61% as against a figure of 67% for the child population in No. 10 Health Division as a whole.

In contrast to the above, only 163 children under one year of age underwent primary vaccination, of which 162 were successful, and 20 persons over the age of 15 years received primary vaccination all successful. In addition to the above, a total of 80 persons were re-vaccinated, all but four successfully.

If one deducts from the total of 450 live births in 1956 belonging to the district the 14 infant deaths in 1957—this means that out of the 436 survivors only 163 underwent primary vaccination, or approximately one in every three babies. This low proportion can only be viewed seriously, as the figure fails to improve as the years pass, despite the efforts of doctors, nurses, health visitors, and health educationists to impress on parents the facts (1) that small-pox is still a grave potential risk in this country, and (2) that vaccination in the first year of life whilst conferring substantial immunity over many years, is virtually devoid of all risk. One looks here for rather more active support from the family doctor, whose attitude to this question can make the difference between success and failure.

POLIOMYELITIS VACCINATION.

The programme of poliomyelitis vaccination, which commenced early in 1956, continued and was in fact extended during 1957. Whereas in 1956 entitlement to receive the “vaccine” was confined to children born during the years 1947—1954, during the current year this was amended to include children born during the years 1955 and 1956 : and in November, 1957, a further amendment was introduced, making vaccine available to all children under 15 years of age, to expectant mothers, and to the families of general practitioners and ambulance personnel, in addition to selected groups of doctors and nursing staffs in the hospital service.

The following poliomyelitis “vaccinations” were carried out in the Rural District during the current year :—

Children under five years of age	138
Children and other persons over five years of age . .	476
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Total	614
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SECTION X.

NATIONAL ASSISTANCE ACT, 1948.

The Local Authority carrying responsibility for the implementation of Parts III and IV of this Act is the County Council, and the administrative machinery, in this case also, is on a divisional basis. The main provisions, of Part III relate to the provision of accommodation both temporary and residential for persons who, are without lodging ; and to Welfare Services in general for persons handicapped by infirmities such as Blindness, Deafness, Dumbness, crippling physical defects, and other disabilities of a severe and permanently handicapping character.

The approved scheme of the County Council in regard to Welfare utilises very fully the services rendered by the various voluntary agencies already in existence prior to this legislation.

Section 47 of this Act prescribes the procedure whereby aged and infirm persons, if not receiving adequate care and attention in their own homes, may, by a Court Order, be removed to a suitable hospital following a hearing by the Court of evidence in support of a certificate issued by the Medical Officer of Health after close consideration of all the circumstances of the case : whilst the later Act of 1949 amends the original procedures to make it speedily effective in cases of urgency.

Section 50 is of importance in that it places on the County District Authority the duty of arranging for the burial or cremation of the body of any person who has died or been found dead within the district when "it appears to the Authority that no suitable arrangements for the disposal of the body have been or are being made otherwise than by the Authority."

No action under either of these sections has been called for during the year.

SECTION XI.

THE CHILDREN ACT, 1948.

In the main, this Act provides for the care and welfare of children and young persons up to the age of 18 years who for one reason or another are deprived of normal home life, and it thus has an important bearing on the mental and physical health of such children.

The County Council, which is the Local Authority for the purposes of this Act, exercises its functions through its Children's Committee and the Children's Officer, who is responsible to the Committee for the efficient administration and day-to-day operation of the service, which is carried out on a regional or area basis.

The Warrington Rural District lies administratively within the responsibility of the Children's Officer for the Leigh area ; an area newly constituted during 1953, to which Miss E. Cole was appointed as Area Children's Officer, with offices in Leigh itself. The reorganisation within the Children's Department has made possible a closer and more effective liaison between that department and my own as Divisional Medical Officer.

Fortunately the days of serious neglect and wilful brutality have receded, but there still exists an appreciable number of cases where minor degrees of cruelty and neglect arise often as the result of indifference or simply inadequacy on the part of the parents. Such cases must give rise to concern in the minds of a number of different groups of social workers : Children's Visitors, Health Visitors, Inspectors of the N.S.P.C.C., etc.—and are not infrequently complicated by insanitary and overcrowded housing conditions, or the frank mental backwardness or defectiveness of parents and/or children. In order to integrate all viewpoints, to consider the action most appropriate and the officer in whose particular sphere of influence the probable remedy lies, regular case conferences are held (at two-monthly intervals) and are attended by representatives of both statutory authorities and voluntary agencies which have the interests and welfare of children at heart. These conferences have been most valuable in enabling effective supervisory remedial measures to be undertaken.

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